

tials, and the executive medical board of the County Hospital and the Los Angeles County Medical Association saw fit to recommend to the Board of Supervisors, through the County Welfare Department (of which the County Hospital is a unit) that the curative clinic in the city of San Fernando be discontinued, and that the work of caring for the indigent sick of that community be done in the private offices of the physicians who had been serving gratuitously in that local curative clinic. There was attached the further proviso that, for each socially serviced indigent patient who in regular course was referred to such a physician's office and treated, the physician should receive a nominal stipend of fifty cents per patient treated, for use of his personal equipment and office facilities.

* * *

A Preliminary Estimate of the Worth of the Plan.—The plan has been in operation for only about four months, and complicating factors (incident to charges for health center building upkeep and other items) have made it difficult to come to any final conclusions as to all the merits and the demerits of the new plan. It may be stated, however, that the members of the profession at San Fernando seemingly prefer the new method of procedure to the former clinic in the health center building, and that the plan also continues to have the approval and support of the administration of the Los Angeles County Hospital. At a meeting of the County Hospital executive medical board, held several days before the time of our writing, figures were submitted showing that, at the end of three or four months of the experiment under the new system of socially serviced indigent patients who receive treatment in private offices, the number treated was less than had been coming to the clinic in the health center building, and that the actual cost of the service rendered was something like \$200 less per month. Mention is made of this new method of procedure, because it is an innovation in this type of work. If the medical and surgical services can be given as efficiently and at less cost to the taxpayers, with preservation of the personal physician-patient relationship, with retention to patient of self-respect through abolition of the pauper complex, and with ever so modest but satisfactory stipends to the staff physicians for the utilization of their offices and equipment, then this new San Fernando plan may find for itself a place in the readjustment procedures now being tried out, in efforts to care for the indigent sick by methods better than those in vogue in the past.

NOBEL PRIZE IN MEDICINE COMES TO CALIFORNIA

Dr. Thomas Hunt Morgan of Pasadena Receives the 1933 Nobel Prize in Medicine.—When one of the Nobel Prizes comes to a State, an institution or an individual, it is a matter of considerable moment. Californians, therefore, are gratified that the 1933 Nobel Prize for medicine should have been bestowed upon Dr. Thomas Hunt Morgan, director of the William G. Kerckhoff

biological laboratories of the California Institute of Technology, to which institution he came from Columbia University in 1928. At the November, 1933, meeting of the Southern California Medical Association he was a guest speaker.

Dr. Robert A. Millikan, who is the director of the California Institute of Technology at Pasadena, and who received the Nobel Prize in physics in 1923 for his own achievements in that field, in speaking of the honor to Doctor Morgan, gave an excellent estimate of the doctor's researches, when he said:

"The discoveries that are grouped around the ideas of chromosomes and genes—discoveries which enable us to connect hereditary qualities with actual minute objects observable in microscopes—represent probably as fundamental an advance in biology as has ever been made in history. It is altogether comparable with the discovery of the circulation of the blood by Harvey or of the germ theory of disease by Pasteur. This discovery and the whole group of developments that have been associated with it have been made by a group of Americans, of which Thomas Hunt Morgan has been the universally recognized leader for the past twenty years."

Members of the California Medical Association, in common with other citizens of the State, extend to Doctor Morgan their congratulations at the great honor given to him, and wish for him long years of continued work and pleasure in the field in which, through his own original labors, he has been able to add so much to the world's scientific knowledge.

VIOLATION OF STATE NARCOTIC ACT DANGEROUS

Letters of Doctors Geistweit and Pinkham.—In an open letter printed in last month's (November) CALIFORNIA AND WESTERN MEDICINE (page 357), Dr. W. H. Geistweit, Jr., of San Diego, detailed some of his observations concerning the lack of knowledge possessed by applicants who sought licenses to practice medicine and surgery in California, and who took the July 1933 examination of the California State Board of Medical Examiners. Doctor Geistweit's criticisms of our medical schools, in permitting young men to start out in practice without adequate knowledge of narcotic laws which, if violated, might seriously imperil the future of the transgressors, are, in our opinion, more than justified. Members of the California Medical Association may well take the time to read Examiner Geistweit's comments and to ponder thereon. The attention of the faculties of the four California medical schools is also directed thereto.

Comes now, to the editor, as the December CALIFORNIA AND WESTERN MEDICINE is being prepared for press, another letter, also dealing with the Federal and State Narcotic Acts. With this difference, however, that the criticisms made are directed against physicians in active practice who, if arrested for violation of the State Narcotic Act, would be subjected not only to humiliation, but to the danger of losing much of their practice in the development of which they had given years of effort and service.

The matter is of so much importance that the letters from Dr. C. B. Pinkham, secretary of the California State Board of Medical Examiners, and of Inspector J. W. Davidson, special agent of the board, are here reprinted for the information of California Medical Association members.

420 State Office Building

Sacramento, California,

November 20, 1933.

Re: Narcotic enforcement.

To the Editor:—We submit herewith enclosed a copy of a report written us by our Special Agent Davidson, dated November 14, 1933, drawing attention to the prevalence of doctors furnishing narcotics to confirmed addicts, based upon an alleged permit which these addicts may carry.

We leave to your judgment whether this merits special mention in "California and Western Medicine" warning doctors against this procedure, and suggesting that they confiscate any alleged "permits" that may come to their attention.

Very truly yours,

C. B. PINKHAM, M. D.,
Secretary-Treasurer.

San Francisco, California,

November 14, 1933.

Re: Narcotics

(Clarence ———, alias Clarence ———).

Dr. C. B. Pinkham,
Secretary-Treasurer, Board of Medical Examiners,
420 State Office Building,
Sacramento, California.

Dear Doctor:

The Narcotic Division has informed us that recently they have received reports showing the prescribing of morphine sulphate to the above-named addict, in each case stating that this man holds what purports to be a permit from the State Board of Pharmacy for him to have narcotics, as he is suffering from chronic asthma and angina pectoris.

This addict was recently arrested in Pasadena and at that time had \$130 in one-dollar bills in his pocket. However, the Municipal Court dismissed the case; reason not known.

From a report filed November 2, 1933, by Dr. ———, Anaheim, California, he furnished this man eighty one-half grain tablets of morphine sulphate, to last one week, stating that this man had been an habitué for twenty-eight years and he furnished him narcotics because of the purported card authorizing the issuance of same.

Regardless of the warnings sent out by the Board, there seems to be no way that we can get the medical profession to use ordinary common sense in the handling of narcotics, and in the case of Clarence ———, the narcotic agent at Los Angeles had requested permission to arrest all of the doctors involved; however, authority so to do was not granted him and he was instructed to confer with the federal narcotic representatives in Los Angeles.

Is there any way that we could get coöperation from the various publishers of county medical bulletins, including "California and Western Medicine," to give publicity to the fact that there is no such authorization under the laws of the State of California or the Federal Government, showing that an addict is authorized to receive narcotics; and if any addict calls at

the office of a licentiate and offers any such document, the licentiate should take that document and keep it and immediately notify the police. The issuance of narcotics to addicts upon any such purported document, without the physician first making a physical examination and satisfying himself (the licentiate) that the patient has a pathology indicating the use of narcotics, is a violation of the law, and subjects the licentiate issuing such prescription or furnishing narcotics to such a person, to arrest for violation of the State Narcotic Law, with the subsequent humiliation that goes with it, as well as the reflection upon an honorable profession.

We are informed by those responsible for observance of the State Narcotic Act that if the medical profession insists upon being lax in prescribing narcotics, it may entail arrest in every case, and we are writing this with the hope that some publicity given the matter may engender respect for the state law.

The following named licentiates have recently reported Clarence ———, alias Clarence ———, as having one of these purported permits:

(EDITOR'S NOTE.—List includes two physicians from Pasadena, one from Los Angeles, three from Long Beach, one from Orange, and one from Anaheim. Names are here omitted.)

Very truly yours,

J. W. DAVIDSON,
Special Agent.

EDITORIAL COMMENT*

THE RÔLE OF HYDROGEN ION CONCENTRATION (pH) IN CERTAIN OCULAR SYMPTOMS

The effect of the hydrogen ion concentration in tears or various medicaments dropped into the conjunctival sac seems to have received little or no attention in English or American ophthalmic literature until Gifford and Smith¹ called attention to it recently. A number of foreign investigators have published reports on the hydrogen ion concentration in normal tears, but they are by no means in agreement. Some investigation of the pH of tears in pathologic states have been recorded, notably those of Oguchi and Nakashima,² who worked principally on trachoma. They devised a technique for estimating the pH of conjunctival secretions as distinguished from the pH of the tears.

Gifford and Smith pointed out the advantages of suitably buffered solutions as a vehicle for the common therapeutic agents used in the eye, but the correlation of certain ocular symptoms with the hydrogen ion content of the tears has not been sufficiently studied, nor has the relief of symptoms, which is possible by a modification of the pH of the fluids in contact with the cornea and conjunctiva, been adequately investigated.

Therapy of corneal and conjunctival conditions is at present empirical and far from satisfactory.

* This department of CALIFORNIA AND WESTERN MEDICINE presents editorial comment by contributing members on items of medical progress, science and practice, and on topics from recent medical books or journals. An invitation is extended to all members of the California and Nevada Medical Associations to submit brief editorial discussions suitable for publication in this department. No presentation should be over five hundred words in length.

¹ Gifford and Smith: Effect of Reaction on Ophthalmic Solutions, Arch. Ophth., Vol. 9 (Feb.), 1933.

² Oguchi and Nakashima: Hydrogen Ion Concentration of the Tears, Arch. f. Ophth., 119:300, 1927.